



## Retail Food Establishment Inspection Report

Floyd County Health Department  
Telephone: 812-948-4726

1678

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name <b>New Albany Roadhouse</b>	Telephone Number ( ) Establishment 812-948-7777 ( ) Owner 812-844-5782	Date of Inspection (mm/dd/yr) 1-17-19	ID # 18- 176
Establishment Address (number and street, city, state, zip code) <b>1702 Graybrook Ln New Albany, IN 47150</b>	Owner <b>Richard Kimes</b>	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up <b>Yes</b> Release Date <b>Today</b>
Owner's Address	Person in Charge <b>Shanda Ross</b>	Summary of Violations: <b>C 2 NC 5 R 7</b>	
Responsible Person's E-mail	Certified Food Handler <b>Richard Kimes 6-24-2020</b>	Menu Type (See back of page) 1 2 3 4 <b>5</b>	

• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"

• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Section#	C/NC	R	Narrative	To Be Corrected By
192	C	R	Observed mashed potatoes dated 1-4-19 in walk-in cooler.	corrected (discarded)
415	C	R	Observed mice droppings behind refrigerator, on shelves in dry storage.	3 days
297	NC	R	Observed footbath nozzle in need of cleaning in upstairs bar	2 days
399	NC	R	Observed restroom exhaust fans not working in upstairs (2) restrooms and mens downstairs RR.	3 weeks
✓ 411	NC	R	Observed 4 light units not working in kitchen and bulb out in fume hood.	1 week
416	NC	R	Observed dead cockroach on dry storage shelf near crockpots.	2 days
430	NC	R	Observed damaged wall and dust material on shelf with crockpots	3 weeks
			-invoice will be mailed and paid before. 2-7-19-	

Received by (name and title printed):

Shanda Ross Bartender

Inspected by (name and title printed):

Thomas Snider, EHS

Received by (signature):

Inspected by (signature):

cc:

cc:

cc:

## Floyd County Health Department Inspection Notes

[illegible]